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CONFIRMATION NO. 3884

Bib Data Sheet

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|---|---|-------------------------------|---|---|
| SERIAL NUMBER 10/752,402 | FILING OR 371(c) DATE 01/06/2004 RULE | CLASS 383 | GROUP ART UNIT 3782 | ATTORNEY DOCKET NO. J-CN4001 |
| APPLICANTS Charles Nelson, Fort Myers, FL; | | | | |
| ** CONTINUING DATA ***** This application is a CIP of 10/229,325 08/26/2002 PAT 6,692,147 which claims benefit of 60/314,977 08/24/2001 This application 10/752,402 claims benefit of 60/516,060 10/31/2003 | | | | |
| ** FOREIGN APPLICATIONS ***** <i>None</i> | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/12/2004 | | | | |
| ** SMALL ENTITY ** | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Joe J. Thomas</i> Examiner's Signature Initials | | STATE OR COUNTRY FL | SHEETS DRAWING 11 | TOTAL CLAIMS 15-20 |
| | | | | INDEPENDENT CLAIMS 3-2 |
| ADDRESS 28165 | | | | |
| TITLE Venting reclosable bags | | | | |
| FILING FEE RECEIVED 450 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |